

# AFY 2016 and FY 2017 Budget



Presentation to: Board of Community Health

Presented by: Elizabeth K. Brady, Chief Financial Officer



#### **Mission**

#### The Georgia Department of Community Health

We will provide Georgians with access to affordable, quality health care through effective planning, purchasing and oversight.

We are dedicated to A Healthy Georgia.

### Agenda

- FY 2016 Current Budget
- AFY 2016 Budget
- FY 2017 Budget

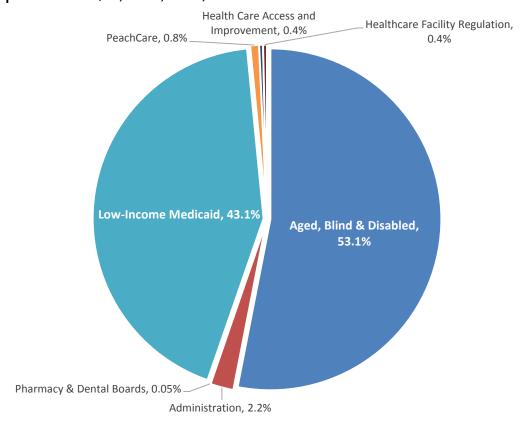




#### FY 2016 Current Budget

### FY 2016 Budget State Funds Budget by Program\*

Total Funds Appropriated: \$13,642,102,230 State Funds Appropriated: \$2,979,649,363



97% of all DCH State Funds are budgeted in Medicaid and PeachCare



<sup>\*</sup> Chart includes state funds only and does not include attached agencies.

### FY 2016 State Funds Budget Highlights

- Departmental Administration budget cut of \$2 million.
- \$3.3 million was appropriated in the Healthcare Facility Regulation program to hire additional nurse surveyors and address a structural deficit.
- \$8.7 million increase in rate calculations for nursing facility ownership changes from January 1, 2012 to June 30, 2014.
- \$5.9 million to increase reimbursement rates for select OB/GYN codes to the 2014 Medicare fee schedule.
- \$17.2 million added for increased reimbursement rates for select primary care codes.





#### AFY 2016 Budget

| Me | edicaid Benefits Items  |  | Governor's<br>Recommendations | As Passed    | Difference |
|----|---|--|-------------------------------|--------------|------------|
| 1  | Aged Blind and<br>Disabled, Low-Income<br>Medicaid, PeachCare | Funds requested for AFY 2016 benefit growth.   | \$32,507,590                  | \$32,507,590 | \$0        |
| 2  | Aged Blind and Disabled                                       | Provide funding for pharmacy cost due to high cost of Hepatitis C and Cystic Fibrosis drugs.   | 26,520,266                    | 26,520,266   | 0          |
| 3  | Aged Blind and<br>Disabled                                    | Provide funding to cover increase in Part D clawback payments starting in January 2016.  | 4,157,276                     | 4,044,497    | (112,779)  |
| 4  | Indigent Care Trust<br>Fund                                   | Provide funding for state match for DSH payments for private deemed and non-deemed hospitals.  | 14,668,976                    | 14,668,976   | 0          |
| 5  | Aged Blind and<br>Disabled                                    | Provide funding for an increase in the premiums for Part B Medicare for Medicaid members who are also eligible for Medicare ("dual eligible"). | 13,081,365                    | 13,081,365   | 0          |
| TC | OTAL FOR MEDICAID BI  | \$90,935,473   |                               |              |            |



| O  | perations Items                   | Governor's<br>Recommendations   | As Passed   | Difference  |             |
|----|-----------------------------------|---|-------------|-------------|-------------|
| 6  | Administration                    | Cover added expenses for 1095-B reporting required by the Patient Protection and Affordable Care Act (PPACA).                         | \$1,817,591 | \$1,817,591 | \$0         |
| 7  | Administration                    | Increase funds to account for reduced matching rate for certain MMIS-related activities.  | 2,155,857   | 2,155,857   | 0           |
| 8  | Administration                    | Increase funds for Teamworks to comply with new IRS reporting requirements of the Patient Protection and Affordable Care Act (PPACA). | 3,520       | 3,520       | 0           |
| 9  | Healthcare Facility<br>Regulation | Reduce funds to meet projected expenditures.  |             | (119,000)   | (119,000)   |
| TO | TOTAL FOR OPERATIONS ITEMS        |   | \$3,976,968 | \$3,857,968 | (\$119,000) |

| AFY 2016 Budget             | Governor's<br>Recommendation | As Passed    | Difference  |
|-----------------------------|------------------------------|--------------|-------------|
| Medicaid Benefits Items     | \$90,935,473                 | \$90,822,694 | (\$112,779) |
| Operations Items            | 3,976,968                    | 3,857,968    | (119,000)   |
| TOTAL BUDGET RECOMMENDATION | \$94,912,441                 | \$94,680,622 | (\$231,779) |



<sup>\*</sup> State Funds Only

| St | State Health Benefit Plan Items |   | Governor's<br>Recommendations | As Passed | Difference |
|----|---------------------------------|---|-------------------------------|-----------|------------|
| 10 | State Health Benefit<br>Plan    | Increase funds for Medicare Advantage plans effective January 1, 2016. (Total Funds: \$45,800,000)  | Yes                           | Yes       |            |
| 11 | State Health Benefit<br>Plan    | Increase funds to reflect updated projections for membership, medical services utilization, and medical trend changes. (Total Funds: \$31,105,104)  | Yes                           | Yes       |            |
| 12 | State Health Benefit<br>Plan    | Reduce funds for the reduction in employee contribution rates effective January 1, 2016. (Total Funds: (\$5,550,000))   | Yes                           | Yes       |            |
| 13 | State Health Benefit<br>Plan    | Reflect the delay of the scheduled increase of the employer contribution rate for non-certificated school service employees from July 1, 2015 to January 1, 2016. (Total Funds: (\$56,763,150)) | Yes                           | Yes       |            |



| M | edicaid Benefits Items                             |  | Governor's<br>Recommendations | As Passed    | Difference     |
|---|--|--|-------------------------------|--------------|----------------|
| 1 | Aged Blind and<br>Disabled, Low-Income<br>Medicaid | Funds requested for FY 2017 benefit growth.  | \$102,896,756                 | \$61,042,555 | (\$41,854,201) |
| 2 | Aged Blind and<br>Disabled                         | Provide funding for pharmacy cost due to high cost of Hepatitis C and Cystic Fibrosis drugs.   | 26,520,266                    | 24,398,107   | (2,122,159)    |
| 3 | Aged Blind and<br>Disabled                         | Provide funding to cover increase in Part D clawback payments starting in January 2016.  | 8,212,532                     | 8,088,994    | (123,538)      |
| 4 | Aged Blind and<br>Disabled                         | Provide funding for an increase in the premiums for Part B Medicare for Medicaid members who are also eligible for Medicare ("dual eligible"). | 21,039,788                    | 21,039,788   | 0              |
| 5 | Aged Blind and<br>Disabled, Low-Income<br>Medicaid | FY2017 Federal Medical Assistance Percentage (FMAP) savings.   | (38,443,460)                  | (38,443,460) | 0              |
| 6 | PeachCare  | FY2017 Enhanced Federal Medical Assistance Percentage (eFMAP) savings.   | (24,648,601)                  | (24,648,601) | 0              |
| 7 | Aged Blind and<br>Disabled                         | Transfer administration of the Community Care Services Program (CCSP) waiver program to the Department of Community Health.                    | 52,680,775                    | 52,680,775   | 0              |
| 8 | Aged Blind and<br>Disabled, Low-Income<br>Medicaid | Additional revenue from hospital provider payments.  | 13,564,771                    | 13,564,771   | 0              |

| Ma   | dissid Panalita Itama (                            | -out \   | Governor's<br>Recommendations | As Passed     | Difference    |
|------|--|--|-------------------------------|---------------|---------------|
| IVIE | edicaid Benefits Items (                           |  | Recommendations               | AS Fasseu     | Dillerence    |
| 9    | Aged Blind and Disabled                            | Reduce funds for previous changes in rate calculations for nursing facility operator changes to reflect projected expenditures.  |                               | \$(4,100,000) | \$(4,100,000) |
| 10   | Aged Blind and<br>Disabled                         | Increase funds to provide for a 3% inflation adjustment on the 2012 nursing home cost reports.   |                               | 11,300,000    | 11,300,000    |
| 11   | Aged Blind and<br>Disabled                         | Increase funds for the Independent Care Waiver Program (ICWP) Personal Support rates to match the CCSP and SOURCE program rates.   | -                             | 3,774,382     | 3,774,382     |
| 12   | Aged Blind and<br>Disabled                         | Increase funds for reimbursement rates for Adult Day Health Centers by 5% to provide parity with other home and community-based service providers.   |                               | 399,670       |               |
| 13   | Aged Blind and<br>Disabled, Low-Income<br>Medicaid | Increase reimbursement rates for occupational and physical therapy within the Children's Intervention Services (CIS) program.  |                               | 2,000,000     | 2,000,000     |
| 14   | Aged Blind and<br>Disabled                         | Evaluate budget neutral payment methodologies for Medicaid member access to services provided by newly-enrolled long-term acute care and inpatient rehabilitation hospitals.   |                               | Yes           |               |
| 15   | Aged Blind and<br>Disabled                         | Transfer funds from the Medicaid: Aged, Blind and Disabled program to the Departmental Administration and Program Support program for positions and operational costs related to the Community Care Services Program (CCSP). |                               | (1,407,028)   | (1,407,028)   |



|    |                         |   | Governor's      |               | D:#           |
|----|-------------------------|---|-----------------|---------------|---------------|
|    | dicaid Benefits Items ( | cont.)  | Recommendations | As Passed     | Difference    |
| 1  | Aged Blind and          |   |                 |               |               |
| 1  | Disabled, Low-Income    | Increase funds to increase reimbursement rates for select primary care  |                 | <b>***</b>    | 400 000 045   |
| 16 | Medicaid                | and OB/GYN codes to 100% of 2014 Medicare levels.                       |                 | \$26,203,315  | \$26,203,315  |
|    |                         | Increase Advanced Life Support (ALS) emergency transport code           |                 |               |               |
| 17 | Low-Income Medicaid     | reimbursement rate for EMS providers by 7%.                             |                 | 634,314       | 634,314       |
|    |                         | Effective July 1, 2016, Care Management Organizations (CMO) are         |                 |               |               |
|    |                         | required to increase their current per unit reimbursement rates for     |                 |               |               |
|    |                         | contracted primary care, OB/GYN, and EMS providers at the increased     |                 |               |               |
| 18 | Low-Income Medicaid     | rates mandated by HB 751.   |                 | Yes           |               |
|    |                         | Provide funds to evaluate cost-saving measures through accurate         |                 |               |               |
|    |                         | diagnosis of ADHD through NEBA and report back to the General           |                 |               |               |
| 19 | Low-Income Medicaid     | Assembly by January 1, 2017.  |                 | 200,000       | 200,000       |
|    | Aged Blind and          |   |                 |               |               |
| 1  | Disabled                | Increase funds for a 3% increase in ventilator reimbursement rates.     |                 | 95,041        | 95,041        |
| 20 | Diodolog                |   |                 | 33,041        | 33,041        |
|    |                         | Increase funds for a \$250 add-on payment for newborn delivery in rural |                 |               |               |
| 21 | Low-Income Medicaid     | counties (population less than 35,000).                                 |                 | 387,407       | 387,407       |
|    |                         |   |                 |               |               |
| TO | TAL FOR MEDICAID BE     | ENEFITS   | \$161,822,827   | \$157,210,030 | (\$4,612,797) |



| Ор | erations Items  |  | Governor's Recommendations | As Passed   | Difference |
|----|---|--|----------------------------|-------------|------------|
| 22 | Administration, Dentistry,<br>Pharmacy, Health Care<br>Access and Improvement,<br>Healthcare Facility<br>Regulation | Increase funds for merit-based pay adjustments and employee recruitment and retention initiatives effective July 1, 2016.  | \$686,031                  | \$749,156   | \$63,125   |
| 23 | Administration, Dentistry,<br>Pharmacy, Health Care<br>Access and Improvement,<br>Healthcare Facility<br>Regulation | Increase funds to reflect an adjustment in merit system assessments.   | 20,738                     | 5,828       | (14,910)   |
| 24 | Administration, Dentistry,<br>Pharmacy, Health Care<br>Access and Improvement,<br>Healthcare Facility<br>Regulation | Reduce funds to reflect an adjustment in agency premiums for DOAS administered self-insurance programs.  | (32,977)                   | (76,238)    | (43,261)   |
| 25 | Administration  | Increase funds to reflect an adjustment in TeamWorks billings.   | 24,035                     | 24,035      | 0          |
| 26 | Administration  | Reduce funds to reflect 100% federal match for PeachCare administration.   | (7,669,673)                | (7,669,673) | 0          |
| 27 | Administration  | Increase funds to comply with the Patient Protection and Affordable Care Act (PPACA) requirement that 1095-B forms be provided to individuals enrolled in PeachCare or Medicaid. | 1,817,591                  | 1,817,591   | 0          |
| 28 | Administration  | Increase funds to replace the loss of federal funds for the Medicaid Management Information System (MMIS).   | 2,155,857                  | 2,155,857   | 0          |



|    |                                       |  | Governor's      |           |            |
|----|---------------------------------------|--|-----------------|-----------|------------|
| Op | Operations Items (cont.)              |  | Recommendations | As Passed | Difference |
| 29 | Administration                        | Increase funds to reflect an adjustment in the employer share of the Employees' Retirement System.   |                 | \$15,014  | \$15,014   |
| 30 | Administration                        | Reduce funds for contracts.  |                 | (275,625) | (275,625)  |
| 31 | Administration                        | Utilize existing funds to initiate contract services with an external firm for mandatory nursing home audits.  |                 | Yes       |            |
| 32 | Administration                        | Transfer funds from the Medicaid ABD program for positions and operational costs related to the Community Care Services Program (CCSP).  | _               | 1,407,028 | 1,407,028  |
| 33 | Administration                        | Redirect any administrative savings from the transfer of the CCSP to fund additional slots and report to the Georgia General Assembly on progress by January 1, 2017.                        |                 | Yes       |            |
|    | Administration                        | DCH is authorized to submit a request an 1115 waiver request to the Centers for Medicare and Medicaid Services.  |                 | Yes       |            |
| 35 | Administration                        | Inspect each medical facility the Department is authorized to regulate under Paragraph (7) of OCGA 31-2-1 on an annual basis, maintain records and report to the General Assembly each year. |                 | Yes       |            |
|    | Health Care Access and Improvement    | Eliminate one-time start-up funds for Federally Qualified Health Centers.  |                 | (250,000) | (250,000)  |
| 37 | Health Care Access and<br>Improvement | Increase funds for two FQHC community start-up grants in Jackson and Jenkins Counties.   |                 | 500,000   | 500,000    |
| 00 | Health Care Access and<br>Improvement | Increase funds for contract services for medically fragile children who do not qualify for the "Katie Beckett" TEFRA/Deeming Waiver.   |                 | 250,000   | 250,000    |



| Op                         | perations Items (cont.)               |  | Governor's Recommendations | As Passed     | Difference |
|----------------------------|---------------------------------------|--|----------------------------|---------------|------------|
| 39                         | Health Care Access and Improvement    | Utilize existing funds to continue the Rural Hospital Stabilization Committee's grants, with pilot sites to be selected by the Rural Hospital Stabilization Committee. |                            | Yes           |            |
| 40                         | Health Care Access and Improvement    | Increase one-time funds for the purchase of three telemedicine equipment devices to support middle Georgia EMS services.   |                            | 42,000        | 42,000     |
| 41                         | Health Care Access and<br>Improvement | Increase funds to the Southwest Georgia Cancer Coalition to assist with access to quality cancer care and treatment in Southwest Georgia.                              |                            | 25,000        | 25,000     |
| 42                         | Health Care Access and Improvement    | Increase funds to establish a Patient Centered Medical Home (PCMH) grant program for rural stabilization.  |                            | 300,000       | 300,000    |
| 43                         |                                       | Additional General Obligation Bond request for the Integrated Eligibility System = \$3,000,000.  |                            |               |            |
| TOTAL FOR OPERATIONS ITEMS |                                       | (\$2,998,398)  | (\$980,027)                | \$2,018,371   |            |
| FY                         | FY 2017 Budget                        |  | Governor's Recommendation  | As Passed     | Difference |
| Medicaid Benefits Items    |                                       | \$161,822,827  | \$157,210,030              | (\$4,612,797) |            |



TOTAL BUDGET RECOMMENDATION

Operations Items

2,018,371

(\$2,594,426)

(980.027)

\$156,230,003

(2,998,398)

\$158,824,429

<sup>\*</sup> State Funds Only

|    |                                 |  | Governor's      |           |            |
|----|---------------------------------|--|-----------------|-----------|------------|
| St | State Health Benefit Plan Items |  | Recommendations | As Passed | Difference |
| 44 | State Health Benefit<br>Plan    | Increase funds for Medicare Advantage plans effective January 1, 2016. (Total Funds: \$91,600,000).  | Yes             | Yes       |            |
| 45 | State Health Benefit<br>Plan    | Increase funds to reflect updated projections for membership, medical services utilization, and medical trend changes. (Total Funds: \$4,252,738).   | Yes             | Yes       |            |
| 46 | State Health Benefit<br>Plan    | Reduce funds for the reduction in employee contribution rates effective January 1, 2016. (Total Funds: (\$11,100,000)).  | Yes             | Yes       |            |
| 47 | State Health Benefit Plan       | Reduce funds by identifying future year plan design changes (Total Funds: (\$32,784,000)).   | Yes             | Yes       |            |
| 48 | State Health Benefit Plan       | Reduce funds due to a scheduled reduction in the Transitional Reinsurance Fee imposed by PPACA (Total Funds: (\$7,420,000)).   | Yes             | Yes       |            |
| 49 | State Health Benefit<br>Plan    | Increase funds for a scheduled increase of the employer contribution rate for non-certificated school services employees from \$746.20 to \$846.20 effective January 1, 2017 (Total Funds: \$30,405,700).  | Yes             | Yes       |            |
| 50 | State Health Benefit<br>Plan    | Authorize a pilot program for non-certificated system-directed health care coverage for a 24-month pilot effective for coverage year January 1, 2017, at the end of which the participating systems may opt to return to the state plan without penalty. |                 | Yes       |            |
| 51 | State Health Benefit<br>Plan    | Reflect a total fund balance for Other Post-Employment Benefits (OPEB) liabilities of \$925,103,053 by recognizing 2015 payments (\$478,094,972) and pending deposits (\$314,627,314).   |                 | Yes       |            |



#### AFY 2016 and FY 2017 Budget Update

# Additional Information on DCH Website

www.dch.georgia.gov

